FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Washington, DC

SEC Mail

Mail Processing

Section

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	OMB APPROVAL								
Expires: . Estimated	OMB Number:3235-0076 Expires:August 31, 2008 Estimated average burden hours per form16.00 SEC USE ONLY								
Prefix			Serial						
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	DATE RECEIVED								
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Name of Offering (check if this is an am	endment and name	has changed, and it	ndicate change.)		
Limited Partnership Inte	rests of Long Meado	w Holdings, L.P.				
Filing Under (Check box(e	es) that apply):	☑ Rule 506	Section 4(6)	ULOE		
Type of Filing:	New Filing	Amendment				
		A. BASI	CIDENTIFICAT	ION DATA		
Enter the information	requested about the i	ssuer				
Name of Issuer	check if this is an ame	ndment and name h	nas changed, and in	dicate change.	080	58575
Long Meadow Holdings,	L.P.		_		000	
Address of Executive Office	ces		(Number and Stree	et, City, State, Zip Co	de) Telephone N	umber (Including Area Code)
c/o Long Meadow Invest	tors, LLC, 1200 High I	Ridge Road, Stamf	ord, CT 06905		(203) 329-88	57
Address of Principal Office	es		(Number and Stree	et, City, State, Zip Co	de) Telephone N	umber (Including Area Code)
(if different from Executive	Offices)					PROCESSED
Brief Description of Busine	ess: investment	partnership				
		·				AUG 2 8 2008
Type of Business Organiz		_			_	
	rporation		partnership, already		other (please s	THOMSON REUTERS
L. Du	siness trust	☐ limited p	partnership, to be for	med		11.0
			Month	<u>Year</u>	 1	
Actual or Estimated Date	of Incorporation or Org	anization:	0 6	9	6 ⊠ Ad	tual Estimated
Jurisdiction of Incorporation	on or Organization: (Er					
		CI	N for Canada; FN fo	r other foreign jurisdi	ction) C) E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

•			A. BASIC II	DENTIFICATION DAT	Ά	-
• E	Each promoter of the Each beneficial own Each executive office	e issuer, if the iss er having the pov er and director o	suer has been organized wi wer to vote or dispose, or di I corporate issuers and of c	rect the vote or disposition of		
Check Bo	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name	e (Last name first, i	f individual):	Long Meadow Invest	tors, LLC		
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de): 1200 High Ridge F	Road, Stamford, C	CT 06905
Check Bo	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name	e (Last name first, i	f individual):	Old, Jonathan W. III			
Business 06905	or Residence Addr	ress (Number and	Street, City, State, Zip Coo	de): c/o Long Meadow	Investors, LLC, 1	200 High Ridge Road, Stamford, CT
Check Bo	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name	e (Last name first, i	f individual):	<u>-</u>			
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		
Check Bo	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name	e (Last name first, i	findividual):			<u> </u>	
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		
Check Bo	ex(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name	e (Last name first, i	findividual):				
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		
Check Bo	ex(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name	e (Last name first, it	individual):				
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):		
Check Bo	x(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name	Einer the Information requested for the following: - Each brandfold or the search it in Search has been organized within the past five years: - Each brandfold where having the power to vote or dispose, or direct the vote or desposition of, 10% or more of a class of equity securities of the issuer, a Each executive officer and fresh parent and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and managing partners of partnership issuers, and is each general and or Managing Partner in the partnership issuers of Proceedings (Number and Street, City, State, Zip Code): 11 Name (Last name first, if individual): 12 Oid, Jonethan W. III 12 Sanses or Residence Address (Number and Street, City, State, Zip Code): 13 Care (Sans): 14 Name (Last name first, if individual): 15 Sanses or Residence Address (Number and Street, City, State, Zip Code): 16 Care (Sans): 17 Sanses (Sans): 18 Name (Last name first, if individual): 18 Sanses (Sans): 19 Sanses (Sans): 19 Sanses (Sans): 10 Sanses (Sans): 10 Sanses (Sans): 10 Sanses (Sans): 11 Name (Last name first, if individual): 12 Sanses (Sanses): 13 Sanses (Sanses): 14 Sanses (Sanses): 15 Sanses (Sanses): 16 Sanses (Sanses): 17 Sanses (Sanses): 18 Sanses (Sanses): 18 Sanses (Sanses): 19 Sanses (Sanses): 19 Sanses (Sanses): 10 Sanses (Sanses): 10 Sanses (Sanses): 10 Sanses (Sanses): 11 Name (Last name first, if individual): 12 Sanses (Sanses): 13 Sanses (Sanses): 14 Sanses (Sanses): 15 Sanses (Sanses): 16 Sanses (Sanses): 17 Sanses (Sanses): 18 Sanses (Sanses): 18 Sanses (Sanses): 19 Sanses (Sanses): 19 Sanses (Sanses): 10 Sanses (Sanses): 10 Sanses (Sanses): 10 Sanses (Sanses): 11 Sanses (Sanses): 12 S					
Business	or Residence Addr	ess (Number and	Street, City, State, Zip Cod	le):		
Check Bo	x(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name	(Last name first, if	individual):				
Business	or Residence Addre	ess (Number and	Street, City, State, Zip Cod	e):		
Check Bo	x(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFOR	MATION	ABOUT	OFFER	IING			
1. Ha	as the issue	er sold, or	does the is	suer inten			redited inve pendix, Co					☐ Yes	⊠ No
2. W	hat is the m	ninimum in	vestment t	that will be	accepted	from any i	individual?		•••••			\$ <u>2</u> !	<u>50,000</u>
3. Do	es the offe	ring permi	it joint own	ership of a	ı single uni	it?			****			⊠ Yes	i □ No
an off an	nter the info y commiss ering. If a id/or with a sociated pe	ion or simi person to state or st	ilar remune be listed is ates, list th	eration for an assoc ne name o	solicitation iated perso f the broke	of purcha on or agen or or deale	sers in cor t of a brok r. If more	nection wer or deale than five (ith sales o or registere 5) persons	f securitie ed with the to be liste	s in the SEC d are		
Full Na	me (Last na	ame first, i	f individual)				•					
Busines	ss or Resid	ence Addr	ess (Numi	per and St	reet, City,	State, Zip	Code)						
Name o	of Associate	ed Broker	or Dealer				······································						
	n Which Pe heck "All Si	tates" or c	heck indivi	dual State	s)		•••••						☐ Ali States
[AL]					[(CO)		• •					[ID]	
		[IA]			[LA]					-			
☐ [MT]		□ [NV] □ [SD]			[MM]								
Fuli Nar	me (Last na	ame first, if	findividual)								·	
Busines	s or Reside	ence Addr	ess (Numb	er and St	eet, City, S	State, Zip	Code)	<u> </u>					
Name o	f Associate	d Broker o	or Dealer				_				· · · · · · · · · · · · · · · · · · ·		
	n Which Pe heck "All St							· -					☐ All States
[AL]					s)[CO]						□ [HI]	[OI]	☐ All States
	□ [IN]	□ [IA]	[KS]		□ [LA]						☐ [MS]	[MO]	
[™]	[NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ [NC]		□ [OH]	□ [OK]	□ (OR)	□ [PA]	
[RI]	□ [SC]	☐ [SD]		□ (TX)		□ (VT)	□ [VA]	[WA]	□ [WV]	□ [WI]	□ [WY]	□ [PR]	
Full Nar	ne (Last na	ıme first, if	individual)				-					
Busines	s or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (Code)				······································		
Name o	f Associate	d Broker o	or Dealer										
	n Which Pe heck "All St					olicit Purch	nasers						☐ All States
☐ (AL)						□ (CT)			☐ [FL]	☐ [GA]	[HI]	[ID]	
	[IN]	□ [IA]		[KY]			[MD]		[MI]	☐ [MN]	☐ [MS]	[MO]	
[TM]	[NE]	□ [NV]	□ [NH]	□ [NJ]	[MM]	□ [NY]	☐ [NC]	[ND]	[HO)	□ [OK]	☐ [OR]	□ [PA]	
☐ [RI]	□ (SC)	□ (SD)	ואדו 🗆				□ [VA]						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$ 0	\$	0
	Equity	\$ Ō	\$	0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$ 0	<u>\$</u>	0
	Partnership Interests	\$ 50,000,000	\$	31,875,651
	Other (Specify))	\$ 0	\$	0
	Total	\$	\$	31,675,951
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	 81	<u>\$</u>	31,675,951
	Non-accredited Investors	 0	\$	0
	Total (for filings under Rule 504 only)	 0	\$	0_
	Answer also in Appendix, Column 4, if filing under ULOE			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.			
	Type of Offering	Types of Security		Dollar Amount Sold
	Rule 505	 N/A	<u>\$</u>	N/A
	Regulation A	 N/A	<u>\$</u>	N/A
	Rule 504	 N/A	<u>\$</u>	N/A
	Total	 N/A	<u>\$</u>	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	 🗖	<u>\$</u>	0_
	Printing and Engraving Costs	 🛛	\$_	5,000_
	Legal Fees	 🛛	\$	21,773
	Accounting Fees	 🗖	<u>\$</u>	0
	Engineering Fees	 🗆	\$	0_
	Sales Commissions (specify finders' fees separately)	 	\$	0
	Other Expenses (identify)	 🗖	\$	00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

26,773

	C. OFFERING FRICE, NUMBER OF INVE	STURS, EXP	ENSES A	(MD 025	Ur PRU	CEED		
4	b. Enter the difference between the aggregate offering price given in Question 1 and total expenses furnished in response to Part C–Questio "adjusted gross proceeds to the issuer."	n 4.a. This differ	ence is the			<u>\$</u>	49,973	3,227
5	Indicate below the amount of the adjusted gross proceeds to the issuer used for each of the purposes shown. If the amount for any purpose is estimate and check the box to the left of the estimate. The total of the purpose the adjusted gross proceeds to the issuer set forth in response to Part C	not known, furnis payments listed m	ih an nust equal	Ói Dire	ments to fficers, ectors & filiates			nents to thers
	Salaries and fees	·····		\$	0		\$	0
	Purchase of real estate	********		\$	0		\$	0
	Purchase, rental or leasing and installation of machinery and eq	uipment		<u>\$</u>	0		\$	0
	Construction or leasing of plant buildings and facilities			\$	0		\$	0
	Acquisition of other businesses (including the value of securities offering that may be used in exchange for the assets or securitie pursuant to a merger	s of another issu	er 🔲	\$. 0		\$	0
	Repayment of indebtedness			\$	0		\$	0
	Working capital			\$	0	Ø	\$ 49,9	73,227
	Other (specify):			\$	0		\$	0
				\$	0		\$	0
	Column Totals			\$	0	\boxtimes	\$ 49,9	73,227
	Total payments Listed (column totals added)		_		⊠ <u>\$</u>	9,97	3,227	
	D. FEDER	AL SIGNATU	IRE	-		·		
CO	is issuer has duly caused this notice to be signed by the undersigned duly nstitutes an undertaking by the issuer to furnish to the U.S. Securities and the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	1 Exchange Com	on. If this no mission, upo	otice is filed n written re	under Rule equest of its s	505, the	following s information	ignature I furnished
	suer (Print or Type) sing Meadow Holdings, L.P.	Junt	w Sh	n.	Da	iteAugi	ıst 22,	2008
		(Print or Type) Long Meadow In	vestors, LL	C, its Gene	eral Partner			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 prese provisions of such rule?	ntly subject to any of the disqualification	Yes ⊠ No						
	See Ap	opendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to fu (17 CFR 239.500) at such times as required by	rnish to any state administrator of any state in which this notice state law.	is filed a notice on Form D						
3.	The undersigned issuer hereby undertakes to fu	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		er is familiar with the conditions that must be satisfied to be entice is filed and understands that the issuer claiming the availabilisatisfied.							
	uer has read this notification and knows the contented person.	nts to be true and has duly caused this notice to be signed on its	s behalf by the undersigned duly						
	(Print or Type) fleadow Holdings, L.P.	Signature June 4 Sh	Date August 22, 2008						
Name	of Signer (Print or Type)	Title of Signer (Print or Type)							
Jonath	an W. Old, III	Manager of Long Meadow Investors, LLC, its General F	Partner						

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

A			E	M	n	IX	•
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•		2	2			4		[
1	Intend to non-a investors	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Number of Accredited Investors Amount Number of Non-Accredited Investors Amount 3 \$488,764 0 \$0 2 \$668,000 0 \$0 29 \$14,258,431 0 \$0 5 \$1,999,846 0 \$0						
	(Part B – Item 1)		Limited Partnership	Accredited	(Part E						
State	Yes	No	Interests	Investors	Amount	Investors	Amount	Yes	No		
AL				·	<u></u>				<u> </u>		
AK		<u> </u>		 				-			
AZ		<u> </u>							<u> </u> 		
AR						<u>-</u>			\		
CA		X	\$50,000,000					<u> </u>	X		
co		Х	\$50,000,000	··					X		
СТ		X	\$50,000,000	29	\$14,258,431	0			X		
DE									<u> </u>		
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MA		х	\$50,000,000	1	\$30,000	0	\$0		х		
MI											
MN	i			-							
MS											
МО		Х	\$50,000,000	2	\$130,000	0	\$0		Х		
мт	_	х	\$50,000,000	1	\$25,000	0	\$0		×		
NE							_ -				
NV	i										
NH		х	\$50,000,000	1	\$500,000	0	\$0		х		
NJ		х	\$50,000,000	1	\$167,363	0	\$0	:-	х		
NM .							·····				

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1	2	2	3		4						
	Intend to non-ad investors (Part B -	s in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NY		х	\$50,000,000	25	\$8,465,494	0	\$0		х		
NC											
ND											
ОН											
ОК											
OR		Х	\$50,000,000	2	\$400,000	0	\$0		x		
PA		Х	\$50,000,000	2	\$761,578	0	\$0		×		
RI			-						<u></u>		
sc					.				ļ		
SD											
TN		!									
TX		×	\$50,000,000	1	\$2,650,000	0	\$0		X		
UT							· · · · · · · · · · · · · · · · · · ·		 		
VT					77	ļ			<u> </u>		
VA						1	<u></u>		-		
WA WV						-					
WI						 			 		
WY		X	\$50,000,000	2	\$500,000	0	\$0		×		
FN	<u></u> -		\$50,000,000	1	\$100,000	0	\$0 \$0		x		

